

2013 Year in Review

Program Manager, RITN

December 3, 2013

Questions: <u>RITN@nmdp.org</u>

Agenda

- RITN 101 in 5 min (for those new to RITN)
- Updated Scenario Information
- 2013 Highlights
- 2014 Projects & Tasks
- Questions



RITN in 5 Min



RITN Center Staff are Cancer Specialists

- RITN Centers are not 1st Responders or trauma care specialists
- In the aftermath of a marrow toxic incident, RITN centers may:
 - Accept patient transfers to their institutions
 - Provide intensive supportive care to victims
 - Provide treatment expertise to practitioners caring for victims at other locations
 - Travel to other centers to provide medical expertise
 - Provide data on victims treated at their centers
 - Facilitate marrow transplant for those who require it



Possible Incidents & Planned NDMS Movement

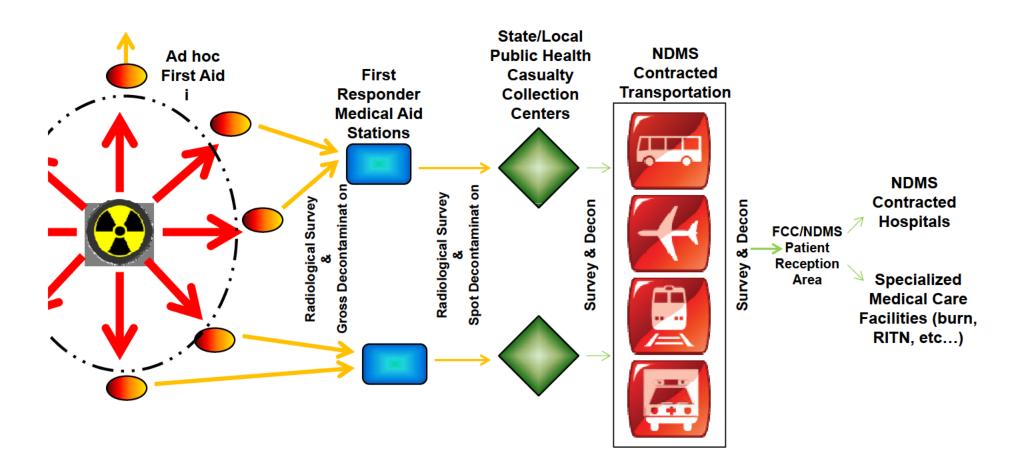
- Military grade nuclear weapon
- Improvised Nuclear Device (IND)
- Radiological exposure device (RED)
- Radiological Dispersal Device (RDD)
- Industrial/nuclear power plant accident

RITN Transplant Centers





Conceptual Flow of Victims to a RITN Center



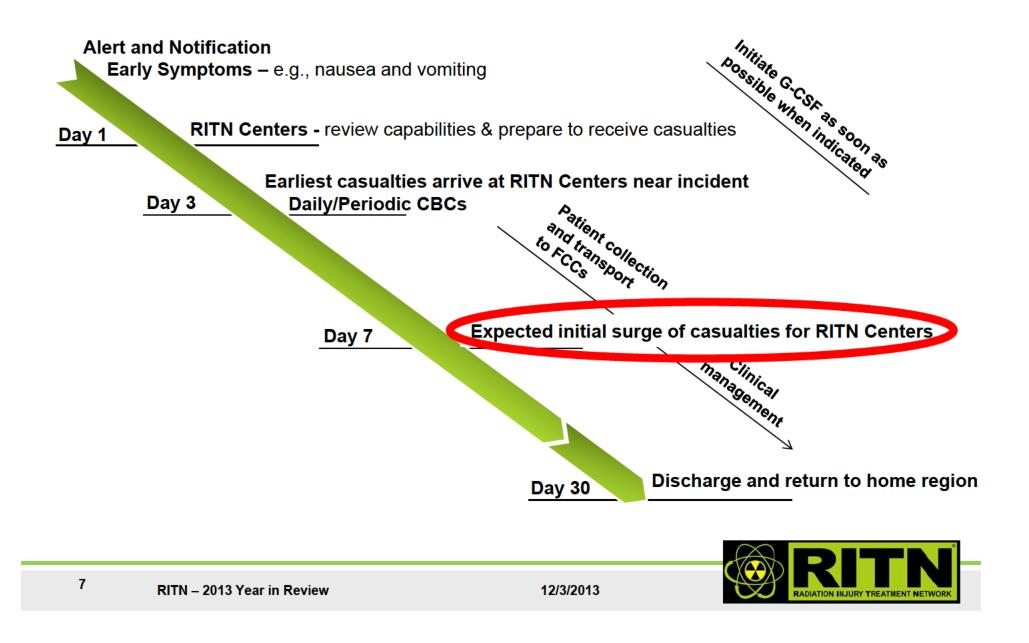
*** This model does not account for victims with trauma or no injuries.



6

12/3/2013

Timeline of RITN Response



Key things to stress about RITN

- 1. Not 1st Responders or trauma care
- 2. Expect to see surge 7-10 days after incident
- 3. If incident is local: the local RITN centers focus is on incident response not RITN
- 4. Casualties should not be significantly contaminated when they arrive at a RITN center
- 5. Affiliated with National Disaster Medical System:
 - a) Casualty distribution is through NDMS
 - b) Reimbursement is through NDMS



Updated Scenario Information



Not if, but when...

"the possibility of a group making a weapon using highly enriched uranium is very plausibly within capabilities of a sophisticated terrorist group." Matthew Bunn (Harvard Belfer Center) 3/22/2012

"Making a simple "gun-type" bomb, the easiest for terrorists to build, requires at least 50 kilograms of HEU enriched to 90% U-235." From "Consolidation: Thwarting Nuclear Theft" Harvard Belfer Center, March 2012

As of 31 December 2012 there were a total of 2331 confirmed radiological theft or misuse incidents reported by participating States; of these 419 involved unauthorized possession and related criminal activities, 615 incidents involved reported theft or loss and 1244 incidents involved other unauthorized activities and events. Paraphrased from IAEA INCIDENT AND TRAFFICKING DATABASE (ITDB) highlights 1993-2012

From 1993-2012 there were 16 incidents where unauthorized possession of HEU or plutonium were reported. Some involving attempts to sell or traffic these materials across international borders. Most were gram sized amounts however some were kilogram quantities of weapons grade material.

Paraphrased from IAEA INCIDENT AND TRAFFICKING DATABASE (ITDB) highlights 1993-2012



IAEA Reported Incidents 1993-2012

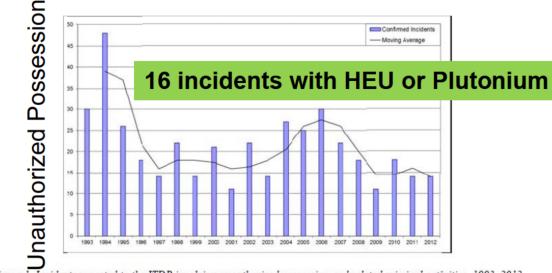
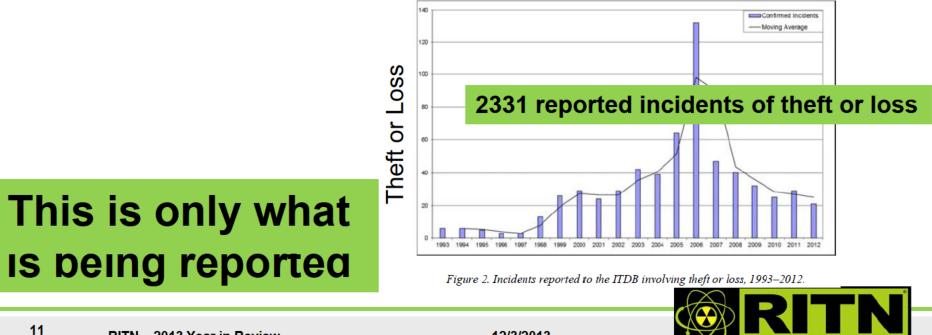


Figure 1. Incidents reported to the ITDB involving unauthorized possession and related criminal activities, 1993–2012.



2013 Highlights

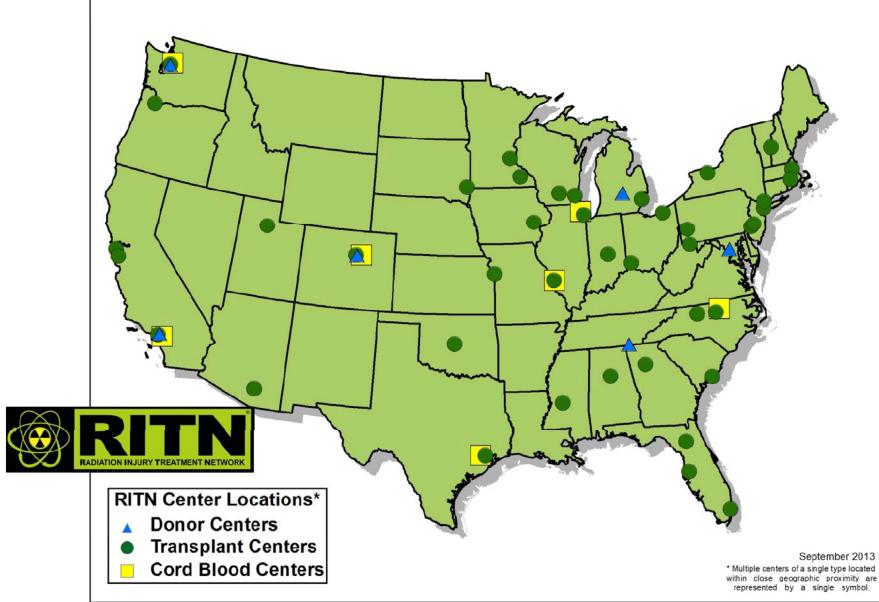


Growth

- Three centers were inactive during 2013:
 - Iowa, Froedtert, Children's of WI
- Three centers joined RITN during 2013:
 - Boston Children's (MA)
 - All Children's (FL)
 - Thomas Jefferson (PA)
- One center left RITN during 2013:
 - Vanderbilt



RITN Center Locations



Radiation Injury Treatment Network

Transplant Centers			Transplant Ce	enters		
AL - University of Alabama at Birmingham	P/A	NDMS HPP	OK - Oklahoma Univ. Medical Cente	er & Childrens Hospital	P/A	NDMS
Z - University Medical Center	P/A	NDMS HPP	OR - Oregon Health & Science Univ	ersity	P/A	NDMS HPP
CA - UCSF Medical Center	P/A		PA - Children's Hospital of Philadelp	hia	Ped	NDMS HPP
A - City of Hope National Medical Center	P/A	NDMS HPP	PA - Temple University			NDMS HPP
A - Stanford Hospital and Clinics	P/A	NDMS HPP	PA - University of Pennsylvania Med	lical Center		NDMS HPP
O - Presbyterian/St. Lukes Medical Center		NDMS HPP	PA - Western Pennsylvania Cancer	Institute		NDMS
L - All Children's Hospital	Ped	NDMS HPP	RI - Roger Williams Medical Center			NDMS HPP
L - H. Lee Moffitt Cancer Center	P/A	NDMS	SC - Medical University of South Ca	rolina		NDMS HPP
L - Shands Hospital at the University of Florida	P/A	HPP	SD - Avera McKennan Transplant In	stitute		HPP
L - University of Miami		NDMS HPP	TX - M.D. Anderson Cancer Center		P/A	HPP
A - Northside Hospital		HPP	TX - Texas Children's Hospital		Ped	NDMS HPP
- University of Iowa Hospitals and Clinics	P/A	NDMS HPP	UT - LDS Hospital			NDMS
- Rush University Medical Center			UT - Primary Children's Medical Cer	nter	Ped	NDMS HPP
- St. Francis Hospital and Health Centers		NDMS HPP	UT - University of Utah		P/A	NDMS HPP
5 - University of Kansas Medical Center		NDMS HPP	WA - Seattle Cancer Care Alliance		P/A	
A - Children's Hospital of Boston	Ped	NDMS HPP	WV - West Virginia University Hospi	tals		NDMS HPP
A - Dana Farber/Partners Cancer Care	P/A	NDMS HPP	WI - Children's Hosp of WI & Midwe	st Children's CC	Ped	NDMS HPP
- Massachusetts General Hospital		NDMS HPP	WI - Froedtert Memorial Lutheran He	ospital		NDMS
- Barbara AnnKarmanos Cancer Center			WI - Univ. of Wisconsin at Madison		P/A	NDMS HPP
- Mayo Clinic Rochester	P/A	NDMS HPP				
- University of Minnesota BMT Program	P/A	NDMS	Donor Cent	ers		
- Barnes-Jewish Hospital at Washington		HPP	CA - City of Hope National Medical Center			
- The Children's Mercy Hospital	Ped	NDMS HPP	CO - Colorado Marrow Donor Program			
- University of Mississippi Medical Center	P/A	NDMS HPP	MD - C.W. Bill Young Marrow Donor Center			
- UNC Hospitals	P/A	NDMS HPP	MI - NMDP operated donor center			
- Wake Forest Univ Baptist Medical Center		NDMS HPP	TN - Blood Assurance			
- Duke University Medical Center	P/A	NDMS HPP	WA - Puget Sound Blood Center			
- Dartmouth-Hitchcock Medical Center			_			
- Strong Memorial Hospital	P/A	NDMS	Cord Blood Banks			
- Memorial Sloan-Kettering Cancer Center	P/A	HPP	CA - StemCyte International Cord Blood Center			
/ - Mount Sinai Hospital	P/A	NDMS HPP	CO - University of Colorado	af	A	
- Westchester Medical Center		NDMS HPP	IL - ITxM Cord Blood Services	\mathbf{C}	(Θ)	$\left(\right)$
I - Cincinnati Children's Hospital Medical Center	Ped		MO - St. Louis Cord Blood Bank		\checkmark	Ĵ L
 H - Cleveland Clinic Foundation H - University Hospitals of Case Medical Center 		NDMS HPP NDMS HPP	NC - Carolinas Cord Blood Bank TX - MD Anderson			RADIA
		NUMO NEE	WA - Puget Sound Blood Center			
d = Pediatric patient only facility				Т	°C 54	1
A = Pediatric and adult capable facility				D	C e	6
DMS = National Disaster Medical System Center				CB		
P = Hospital Preparedness Program				Tot	al <u>6</u> 7	<u> </u>
If no capability is annotaed the facility is adult only			As of 12 Sept 2013	Total NDMS Center	re 42	
				% TCs that are NDM		
				Total HPP Center		
a loss of the second seco	0	dia anna anna anna anna anna anna anna a		AV TOO that and UD	D 700/	

NETWOR

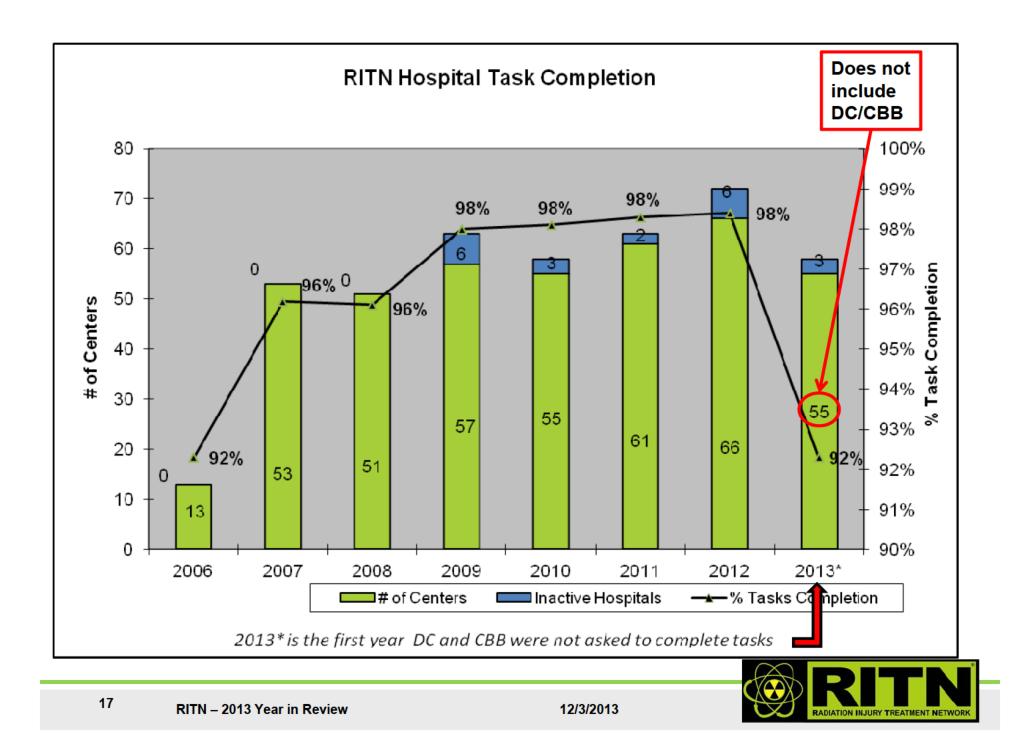
% TCs that are HPP 76%

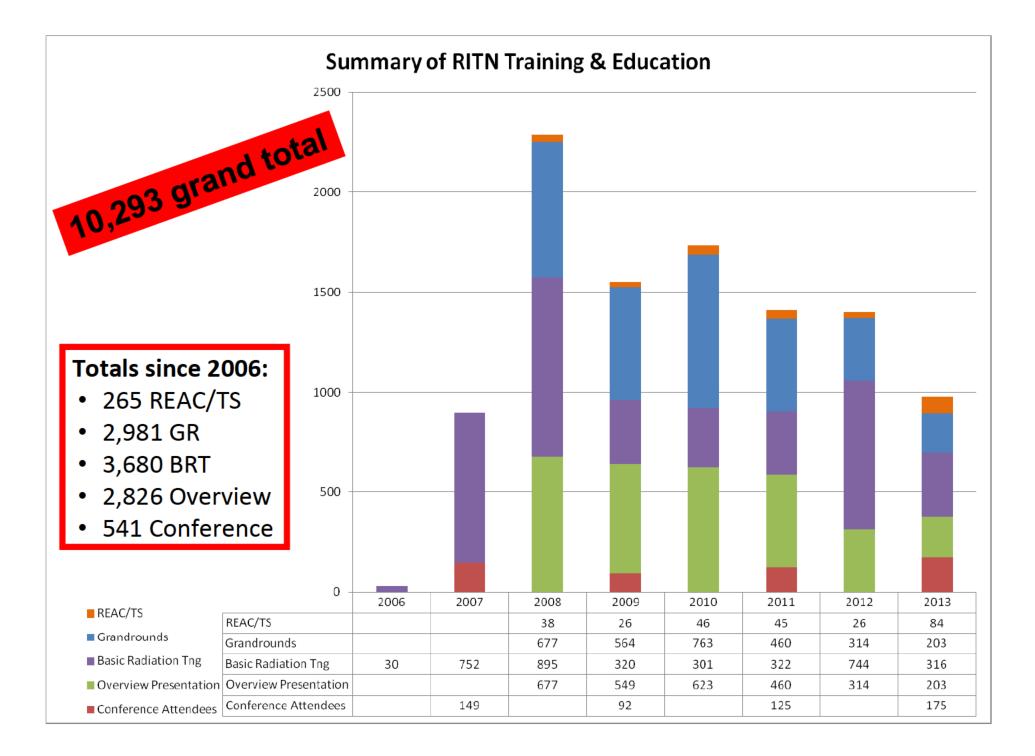
**please report any corrections to this document to RITN@nmdp.org

2013 Highlights

- Site Assessments
- Tabletop exercises attended
- Web based training released (https:\\nmdp.sumtotalsystems.com)
 - 1. Intro to RITN
 - 2. RITN Concept of Operations
 - 3. GETS 101
 - 4. Satellite telephone 101
 - 5. Basic Radiation Training
 - 6. Non-medical Radiation Awareness Training
- Mayo Full-scale Exercise
- 2 x Web based tabletop exercises
- Mobile REAC/TS held at Duke University
- 2 x resident REAC/TS courses
- New Partnership with CMCRs
- 4th biennial conference w/ 175 attendees







2014 Projects and Tasks



12/3/2013

2014 Projects

- Addition of 5+ transplant centers
- 2014 survey
- Release RITN Referral Guidelines early 2014
- Collect triage guidelines for release late 2014
- Regional collaboration meeting for NY-NYC
- G-CSF distribution project with ASTHO and CDC
 - Will seek 6 subject matter experts to attend workshop
- 2 x Mobile REAC/TS training sessions (Boston & Chicago)
 - Travel expenses for up to 20 physicians
- Review of updated REMM ARS guidelines
- Medical staff risk communications training development
- Exercises: Full-Scale Exercise, 3 x Web based TTX, Communications drill with DHHS-ASPR

2014 Tasks (Nov 1, 2013-Aug 31, 2014)

1. Administrative

 a) SOP update, contact update, GETS test, HCS, satellite phone, IRB of consents

2. Exercise

- a) Primary choice will be web based on 3 scheduled dates
- b) Can coordinate and host own if prefer

3. Training

 a) Options: 20 x BRT, MD to REAC/TS, Grandrounds, Overview to external preparedness group, submit triage guidelines or site assessment







www.RITN.net



www.REMM.NLM.gov

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

EMERGENCY MEDICAL MANAGEMENT 10

Guidance on Diagnosis & Treatment for Health Care Providers

Questions?



24 RITN – 2013 Year in Review

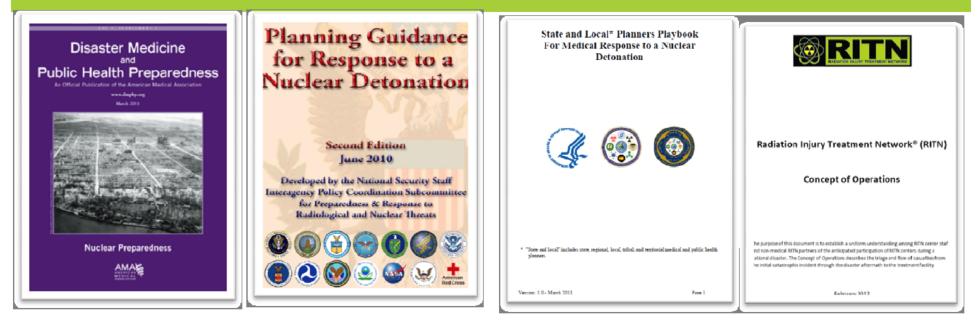
12/3/2013

Partners

- American Society for Blood and Marrow Transplantation
- Department of Defense Office of Naval Research
- Health Resources and Services Administration
- Dept. Health & Human Services Asst. Secretary of Preparedness and Response
- AABB-Disasters Task Force (formerly American Assoc. of Blood Banks)
- New England Center for Emergency Preparedness
- European Group for Blood and Marrow Transplantation-Nuclear Accident Committee
- Center for International Blood and Marrow Transplant Research
- Radiation Emergency Assistance Center/Training Site
- Radiation Emer_enc_Medical Management website: <u>www.remm.nlm.gov</u>



Free Resources



FREE

http://journals.cambridge.org/action/displayIssue?jid=DMP&volumeId=5&serie sId=0&issueId=S1

http://www.remm.nlm.gov/PlanningGuidanceNuclearDetonation.pdf

http://www.phe.gov/Preparedness/planning/playbooks/stateandlocal/nuclear/ Documents/statelocalplaybook-v1.pdf

http://www.ritn.net/About/

